

WEEKLY BULLETIN

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

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GUY P. JONES
Editor

HIGH HEALTH STANDARDS IN WARRIORS

In discussions of public health and the war, little recognition has been given to the tremendous advances that have been made in the advancement of individual health standards among the free, white people who are now engaged in this momentous battle for freedom. The advantages that lie with soldiers who have been educated in hygiene, who have been provided with essential information relative to personal cleanliness and the avoidance of health hazards, in general, has not been sufficiently recognized. To be sure, the modern soldier is under orders; he takes what is given to him and complies with instructions, but his orders are based upon modern scientific procedures.

The superior facilities for the maintenance of nutrition, proper recreation, and wholesome mental attitudes are all of tremendous advantage to the British, Canadian, and American soldiers, sailors and marines. There has probably never been a time in the history of war when so many men of superior physical and mental standards have engaged in actual combat to advance a cause based upon high ideals.

Because we are so close to the picture, we hear much of low physical standards, venereal diseases, dental caries, malnutrition, faulty posture, and dozens of other defects that are encountered in routine examination. As a matter of fact, comparison with fighting men of other Nations leaves the American and Canadian soldiers, at least, head and shoulders, physically, above their opponents.

At all events, building up the health of men who are now fighting under our Flag is a past performance. This is not the time to speak of physical defects. The accomplishments of the past show for themselves.

It must be remembered, however, that there can be no gap in the provision of full public health services to the younger generation that has not yet felt the pressure of war emergencies. There must be no abatement of the program in public health education, in the teaching of hygiene and in the correction of physical defects that may be discovered in small children. It is certain that stronger bodies and stronger minds will be needed 20 years hence even more than they are today. The first burdens associated with peace will be no less than those that are associated with war. Twenty years hence the stresses and strains of civilization shall have reached a peak that will require the utmost courage and fortitude upon the part of all citizens. We are faced with tremendous responsibilities in the maintenance of health among the men on the firing line of today and the safeguarding and promotion of the health of men who will be on the firing line of tomorrow. Because we are at war constitutes no reason for failure to maintain high standards in public health and hygiene at the present time.

Sir George Newman, who was Chief Medical Officer of the Ministry of Health for Great Britain from 1919 to 1935, in discussing health as a National asset says, "It was Virgil who said that 'happy is the man who knows the causes of things.' Until men knew the cause of ill health and the reason for the break in the harmony of the body balance, they could not devise effective preventive measures within the body or outside." He then reviews the vital principles of modern medicine, including the advancements of surgery, diagnosis, treatment, and direct administrative procedure for applying modern medicine to social need

and demand. As a result of the application of the facts, spirit and method of medical science, an ever-expanding social emancipation has come. These social advances in England have resulted in an enlightened mind in which medical science and the scientific method were fertilized by ideals and faith of social service. English medicine became preventive—not a healing of the sickness of the individual only, but a concentration on positive health, adequate nutrition and immunization against diseases, combined with a physical education and nurture for all. England had believed that improved environment was the means of salvation. Now they learn that only an educated and disciplined people would be, in the true sense, a healthy people.

Sir George then quotes Herbert Fisher, President of the Board of Education:—"In order to live well, it is first necessary to live, and in order to live, it is necessary to observe certain elementary rules for the conduct of our physical existence. It is now everybody's duty to make himself as healthy as he can be." As a result, health education in England developed tremendously. The children learned both hygiene and physical exercise as if it were a new game and, as a result, the teaching of health both in the schools and outside has received tremendous stimulus.

Sir George says, "Every now and then public opinion in England has its dismal moods. The country is going to pieces, too many recruits are rejected on medical grounds, we are a C 3 people, so badly housed, poorly educated, or malnourished as to be degenerate from the good old days. There is always some truth in these melancholy surmises, because *some* people are in a bad way always and *some* are periodically C 3. But if we take the long and correct view of our own social history, we shall find good ground for saying that, as a whole, the English people are today better housed, better clothed, better fed, better educated, and enjoy better health than at any other period of our National history of which we have record.

"Their life is longer and larger than ever before. They receive, as a rule, higher wages than before, though they work shorter hours. Their increased leisure is spent in a greater variety of ways of recreation, physical and mental—providing at worst brighter escape from boredom, and at best giving them a fuller and more satisfying life.

"The decreases in the general death rate and the infant mortality and maternal mortality are very remarkable figures and represent the greatest conquest of preventive medicine in our National history. Thus in three generations the expectation of life at birth

has been raised from 45 to 63 years. A child born in England today has an expectation of life 18 years longer than his grandparents had when they were born."

Sir George Newman is recognized as one of the greatest living public health authorities. His career as Medical Officer of Great Britain was brilliant and he has the happy faculty of seeing public health in all of its broad aspects. His appraisal of the people of Great Britain at this time is of inestimable value and should be an important factor in raising public morale.

In the United States, public health conditions are at least as good as conditions in England, and there is no reason why we, as a people, should not look forward with great courage, basing our inspirations upon the physical valor of the men that we are sending to the battle fronts in all parts of the world. As compared with Asiatic races, the health of our men is most outstanding. If we can continue to maintain our standards of living among the men that we send to all quarters of the globe, we shall go far in the provision of a first weapon that will bring freedom to human beings throughout the world and will continue to advance the civilization under which we exist.

SAN JOSE HEALTH DEPARTMENT REPORTS

The report of the San Jose City Health Department for the period ended December 31, 1941, has just been issued. During almost all of this period the late Dr. Henry C. Brown served as health officer of the city. He was succeeded by Dr. Dwight M. Bissell, formerly Health Officer of Monterey County. The report follows the form that had been developed by Dr. Brown over a long period of years and in it there are outlined worthwhile results in standard procedures in public health administration.

The vital statistics reports are presented in detail. The infant mortality rate for the city in 1941 was 26.6 and the birth rate for the year was 14.2. The death rate was 8.7 per 1,000 population.

Conspicuous work was done in rabies control, more than 2,161 stray dogs having been captured. Reports were received of 79 persons bitten by dogs and 79 such animals placed under quarantine. No cases of rabies occurred during the year and no Pasteur treatments were administered. Standard activities in public health nursing, communicable disease control, sanitary inspections and laboratory work were carried on during the year.

Safeguard the health both of body and soul.—
Cleobulus.

CONTRA COSTA ISSUES ANNUAL REPORT

The Contra Costa County Health Department, W. A. Powell, M.D., Health Officer, has issued its annual report for the calendar year, 1941. One of the most outstanding changes in the work of the department comes about through the enormous growth in population due to the development of war industries. In 1940 the population of the county, exclusive of Richmond, was 66,889. The estimated population for 1941 is 97,358 for the county exclusive of Richmond. Except for Antioch, El Cerrito, Pittsburg and Richmond, the entire county is served by the full-time county health unit. The development of war industries has added considerably to the work of the health officer and his staff. This is reflected in all of the various activities that are undertaken.

Dental examinations in the schools increased from 1,680 in 1940 to 2,986 in 1941. There were marked increases in the numbers of venereal disease cases admitted to clinics and the tuberculosis case finding brought 525 new patients into clinics. During the year, a total of 378 sewage disposal systems was inspected, approved and certified to the Federal Housing Administration and 49 installations not built under FHA loans were inspected. This required a total of 1,592 inspections. The number of approvals increased 25 per cent over 1940 and 231 per cent over 1938. These activities have required consistent efforts upon the part of the Sanitary Engineer. It has been necessary also to increase the amount of disposal drainage in certain areas, particularly in new communities where theaters and stores have been built. Private water supplies were also inspected for FHA certification. More than 2,500 sanitary inspections were made during the year. This included inspections of public swimming pools, food stores, meat markets, bakeries, restaurants, grocery stores, bars, and soda fountains.

The added population increased the number of live births from 861 in 1940 to 982 in 1941. There were 1,226 cases of communicable diseases reported during the year. Of these 476 were mumps, 262 chickenpox and 175 whooping cough.

The record for Contra Costa County Health Department during the year indicates definite results in the improvement of public health conditions throughout the county. The department enjoyed the full support of the County Board of Supervisors, the Medical Society, Public Health Association, Parent Teachers Association, Crippled Children Society and the residents of the county.

REVISED LIST OF REPORTABLE DISEASES**Reportable Only:**

Anthrax
 Botulism—if commercial product notify State Department of Health at once.
 Coccidioidal Granuloma
 Dengue—keep patient in mosquito-free room.
 Epilepsy
 Food Poisoning
 Glanders—report by phone or telegraph.
 Jaundice—infectious or epidemic types.
 Malaria—keep patient in mosquito-free room.
 Pneumonia—specify type of pneumococcus, if known.
 Relapsing Fever
 Rheumatic Fever
 Rocky Mountain Spotted Fever
 Tetanus
 Trichinosis
 Tularemia
 Undulant Fever

Reportable and Subject to Isolation:

Epidemic diarrhea of the newborn (in institutions)
 Chickenpox
 Dysentery—Amoebic
 Dysentery—Bacillary—specify type, if known.
 German Measles
 Influenza
 Measles
 Mumps
 Ophthalmia Neonatorum
 Psittacosis
 Rabies—in animals. Use special card.
 Rabies—in humans.
 Septic Sore Throat (in epidemic form).
 Trachoma
 Tuberculosis—use special card.
 Whooping Cough
 Syphilis—use special card.
 Gonorrhea—use special card.
 Chancroid—use special card.
 Lymphopathia Venereum—use special card.
 Granuloma—Inguinale—use special card.

Reportable and Subject to Quarantine and Placarding:

Cholera—report by telephone or telegraph to State Department of Health.
 Diphtheria
 Encephalitis (Infectious)—specify type, if known.

NOTE: This means all forms of acute encephalitis such as St. Louis type, equine type, and any other epidemic form occurring in California.

Leprosy
 Meningitis (due to the meningococcus).
 Paratyphoid Fever—specify type A or B.
 Plague—report by telephone or telegraph to State Department of Health.
 Acute Anterior Poliomyelitis
 Scarlet Fever

REVISED LIST OF REPORTABLE DISEASES—Continued

Smallpox

Typhoid Fever

Typhus Fever

Yellow Fever—report by telephone or telegraph to State Department of Health.

MORBIDITY *

Complete Reports for Certain Diseases Recorded for Week Ending April 18, 1942

Chickenpox

2088 cases from the following counties: Alameda 247, Butte 4, Contra Costa 35, Fresno 28, Humboldt 9, Imperial 9, Kern 19, Kings 2, Lassen 3, Los Angeles 922, Marin 2, Modoc 10, Monterey 14, Nevada 3, Orange 67, Plumas 8, Riverside 19, Sacramento 39, San Bernardino 71, San Diego 186, San Francisco 121, San Luis Obispo 2, San Mateo 55, Santa Barbara 25, Santa Clara 74, Santa Cruz 7, Solano 2, Sonoma 9, Stanislaus 44, Sutter 2, Tulare 5, Ventura 38, Yolo 6, Yuba 1.

German Measles

2865 cases from the following counties: Alameda 501, Butte 1, Contra Costa 17, Fresno 9, Humboldt 1, Kern 85, Kings 8, Lake 1, Los Angeles 261, Marin 14, Merced 7, Modoc 1, Monterey 4, Napa 1, Nevada 167, Orange 33, Placer 1, Plumas 1, Riverside 200, Sacramento 11, San Bernardino 18, San Diego 413, San Francisco 386, San Joaquin 103, San Luis Obispo 70, San Mateo 73, Santa Barbara 12, Santa Clara 98, Santa Cruz 101, Shasta 1, Solano 16, Sonoma 55, Stanislaus 154, Tulare 18, Ventura 2, Yolo 3, Yuba 18.

Measles

8952 cases from the following counties: Alameda 693, Butte 23, Colusa 20, Contra Costa 245, Eldorado 27, Fresno 336, Humboldt 4, Imperial 157, Inyo 5, Kern 129, Kings 13, Lassen 1, Los Angeles 3475, Madera 50, Marin 15, Mariposa 11, Mendocino 4, Merced 194, Modoc 10, Monterey 13, Nevada 1, Orange 500, Placer 3, Plumas 5, Riverside 177, Sacramento 230, San Bernardino 143, San Diego 839, San Francisco 314, San Joaquin 59, San Luis Obispo 63, San Mateo 130, Santa Barbara 119, Santa Clara 163, Santa Cruz 175, Shasta 34, Solano 96, Sonoma 109, Stanislaus 60, Sutter 34, Tehama 14, Tulare 75, Tuolumne 4, Ventura 132, Yolo 46, Yuba 2.

Mumps

2680 Cases from the following counties: Alameda 259, Butte 4, Colusa 1, Contra Costa 92, Fresno 59, Humboldt 3, Imperial 222, Kern 70, Kings 3, Lassen 1, Los Angeles 626, Madera 6, Marin 19, Merced 13, Monterey 10, Nevada 2, Orange 105, Plumas 7, Riverside 104, Sacramento 73, San Bernardino 50, San Diego 347, San Francisco 147, San Joaquin 62, San Luis Obispo 15, San Mateo 51, Santa Barbara 33, Santa Clara 86, Santa Cruz 66, Siskiyou 2, Solano 1, Sonoma 32, Stanislaus 23, Sutter 3, Tehama 32, Tulare 16, Ventura 30, Yolo 4, Yuba 1.

Scarlet Fever

105 cases from the following counties: Alameda 6, Contra Costa 1, Fresno 5, Kern 1, Los Angeles 33, Marin 1, Merced 1, Monterey 1, Orange 5, Riverside 7, Sacramento 2, San Bernardino 11, San Diego 8, San Francisco 4, San Joaquin 1, San Luis Obispo 5, Santa Clara 1, Santa Cruz 2, Sonoma 2, Stanislaus 2, Tulare 4, Yolo 1, Yuba 1.

Whooping Cough

373 cases from the following counties: Alameda 31, Contra Costa 5, Fresno 36, Kern 4, Kings 5, Los Angeles 72, Merced 1, Modoc 9, Monterey 1, Nevada 20, Orange 14, Riverside 1, Sacramento 27, San Bernardino 1, San Diego 19, San Francisco 27, San Joaquin 10, San Luis Obispo 3, San Mateo 2, Santa Barbara 20, Santa Clara 19, Santa Cruz 11, Shasta 1, Sonoma 4, Stanislaus 6, Tulare 3, Ventura 4, Yolo 17.

Coccidioidal Granuloma

One case from Tulare County.

Diphtheria

11 cases from the following counties: Los Angeles 7, San Bernardino 1, San Joaquin 2, Ventura 1.

Dysentery (Bacillary)

2 cases from Los Angeles County.

Encephalitis (Epidemic)

2 cases from the following counties: Los Angeles 1, Tulare 1.

Epilepsy

43 cases from the following counties: Los Angeles 34, Sacramento 1, San Francisco 6, San Mateo 1, Sonoma 1.

*Data regarding the other reportable diseases not listed herein, may be obtained upon request.

Influenza

298 cases reported in the State.

Jaundice (Epidemic)

16 cases from the following counties: Los Angeles 2, Riverside 12, Sacramento 1, Santa Clara 1.

Leprosy

2 cases from the following counties: Monterey 1, Santa Cruz 1.

Malaria

One case from Contra Costa County.

Meningitis (Epidemic)

One case from Los Angeles County.

Paratyphoid Fever

2 cases from the following counties: Fresno 1, Santa Barbara 1.

Poliomyelitis

2 cases from the following counties: Kern 1, Los Angeles 1.

Rabies (Animal)

17 cases from the following counties: Imperial 1, Los Angeles 9, Merced 1, San Diego 5, Stanislaus 1.

Rheumatic Fever

6 cases from Los Angeles County.

Septic Sore Throat

One case from San Mateo County.

Tetanus

One case from Los Angeles County.

Typhoid Fever

2 cases from Riverside County.

Undulant Fever

5 cases from the following counties: Contra Costa 1, Los Angeles 1, Orange 1, Stanislaus 1, Tulare 1.

EDUCATIONAL QUALIFICATIONS
ESTABLISHED

The American Public Health Association has recently adopted two reports that are of interest to public health administrators. These are The Educational Qualifications of Industrial Hygienists and The Educational Qualifications of Nutritionists in Health Agencies. The qualifications of industrial hygienists were prepared by a subcommittee of the Committee on Professional Education of the association, of which Dr. W. P. Shepard of San Francisco is chairman. The report of the educational qualifications of nutritionists in health agencies was prepared by a subcommittee under the same committee of the association. Since these positions are relatively new in public health practice, it is important that definite standards should be developed. The requirements are not excessive but represent essential standards in training and experience for individuals who are to serve in these capacities.

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